



DEPARTMENT OF ENVIRONMENT AND CONSERVATION
DIVISION OF WATER POLLUTION CONTROL

NOTICE OF INTENT (NOI)
for discharges of
HYDROSTATIC TEST WATER

Site Name: BP PRODUCTS NORTH AMERICA INC. - NASHVILLE TERMINAL		Existing Tracking No:
Street Address or Location: 1409 51ST STREET, NORTH NASHVILLE, TN. 37209		Latitude:
		Longitude:
County (ies):	Attach a site location map <input type="checkbox"/> Map attached	
Name and distance to nearest receiving waters:		

Owner or Operator: (the person or legal entity which controls the site's operation; this may or may not be the same as the site name or the official contact name)				
1	Official Contact Person Name: (individual responsible for a site) BRENDA POWELL	Title or Position: TERMINAL MANAGER		
	Mailing Address: 1409 51ST STREET, NORTH NASHVILLE TN. 37209	City: NASHVILLE	State: TN.	Zip: 37209
	Phone: (615) 297.3521	E-mail: BRENDA.POWELL@BP.COM		
2	Local Contact Person Name: (if appropriate, write "same as #1") SAME AS #1	Title or Position:		
	Site Address: (this may or may not be the same as street address)	Site City:	State: TN	Zip:
	Phone: ()	E-mail:		

Write in the box (to the right) or circle the number (above) to indicate where to send correspondence: ☐

PROCESS DESCRIPTION (Reply on a separate page, if necessary)

A brief description of the facility or vessel to be tested: BP IS TO CONDUCT A LEAK/PRESSURE TEST ON A 60,000 GALLON TANK THAT WILL BE USED TO CONTAIN BUTANE. THE VESSEL WAS FORMERLY USED TO STORE PROPANE AND HAS BEEN SUBSEQUENTLY CLEANED.	
Is the vessel to be tested new or used? <input type="checkbox"/> new <input checked="" type="checkbox"/> used	
Estimate of the volume of hydrostatic test water to be discharged: 60,000 GALLONS	
Source of the test water: HYDRANT FROM CITY WATER	
A description of material that has been contained in the vessel, if the vessel has already been in use: PROPANE	
Estimated dates of testing, frequency of tests, and duration: VISUAL FOR OIL + GREASE	
A brief description of Best Management Practices (BMPs) and/or treatment of the hydrostatic test water discharges: WATER WILL BE DISCHARGED TO A TANK DIKE THEN THROUGH AN OIL WATER SEPARATOR THAT FLOWS TO OUR PERMITTED OUTFALL.	
Indicate how long you wish to be covered under this general permit; the division will establish a 12 month term of coverage unless you request a longer time. Please note that coverage under this permit cannot extend beyond the expiration date of the general permit (March 15, 2016). <input type="checkbox"/> 2 years <input type="checkbox"/> 3 years <input type="checkbox"/> 4 years <input type="checkbox"/> 5 years	

STATE USE ONLY

Received Date	Reviewer	EFO	Tracking No. TNG67	High Quality Water
Fee(s)	T & E Aquatic Fauna	Impaired Receiving Stream	NOC Date	

HYDROSTATIC TEST WATER NOI

Site Name:	Tracking No:
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For used sections of natural gas pipeline, permit TNG670000 establishes a limit on the concentration of PCBs in the hydrostatic test water discharge unless the discharger certifies that PCBs have never been used on the pipeline or their presence indicated in the pipeline, as follows:

Polychlorinated Biphenyls (PCBs) have never been used in compressors or other equipment on the pipeline of which the above-described section is a part, nor has the presence of PCBs been indicated in the pipeline of which the above-described section is a part.

<i>ROBERT TWOKOWSKI</i>	<i>ENV. COORDINATOR</i>	<i>Robert Twokowski</i>	<i>11/30/11</i>
Printed Name	Official Title	Signature	Date

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

<i>ROBERT TWOKOWSKI</i>	<i>ENV. COORDINATOR</i>	<i>Robert Twokowski</i>	<i>11/30/11</i>
Printed Name	Official Title	Signature	Date

INSTRUCTIONS

Complete the form Type or print clearly, using black or blue ink; not markers or pencil. Answer each item or enter "N/A," for not applicable. If you need additional space, attach a separate piece of paper to the hydrostatic NOI (Notice of Intent). **Requesting coverage under this permit means that an applicant has obtained and examined a copy of this permit, and thereby acknowledges applicant's ability to be in compliance with permit terms and conditions.** This permit is required for discharges of hydrostatic test water. This form should be submitted at least 30 days prior to the commencement of hydrostatic testing activities.

Permittee Identification/Facility Identification Describe and locate the project, use the legal or official name of the facility or site. Provide the latitude and longitude (expressed in decimal degrees) of the center of the site, which can be located on USGS quadrangle maps. Attach a copy of a portion of a 7.5 minute quad map, showing location of site, with boundaries at least one mile outside the site boundaries.

Give the name(s) of receiving waters Trace the route of hydrostatic test water runoff from the site and determine the name of the river(s), stream(s), creek(s), wetland(s), lake(s) or any other water course(s) into which the hydrostatic test water drains. Note that the receiving water course may or may not be located on the site. If the first water body receiving test water discharge is unnamed ("unnamed tributary"), determine the name of the water body which the unnamed tributary enters.

Submitting the form and obtaining more information Note that this form must be signed by the company President, Vice-President, or a ranking elected official in the case of a municipality, for details see subpart **Error! Reference source not found.** of the general permit. For more information, contact your local EFO, toll-free, at 1-888-891-8332 (TDEC). Submit the completed NOI form (keep a copy for your records) to the appropriate EFO for the county(ies) where the hydrostatic testing activity is located.

EFO	Street Address	Zip Code	EFO	Street Address	Zip Code
Memphis	8383 Wolf Lake Drive, Bartlett	38133-4119	Cookeville	1221 South Willow Ave.	38506
Jackson	1625 Hollywood Drive	38305	Chattanooga	540 McCallie Avenue STE 550	37402-2013
Nashville	711 R S Gass Boulevard	37243	Knoxville	3711 Middlebrook Pike	37921
Columbia	1421 Hampshire Pike	38401	Johnson City	2305 Silverdale Road	37601

Notice of Coverage The division will review the NOI for completeness and accuracy and transmit to the permittee a Notice of Coverage (NOC) and Discharge Monitoring Report (DMR) form.